



BUSINESS HOSPITALITY APPLICATION

The Business Hospitality Pavilions are designed for Chamber and Convis members to showcase their products and services in a dynamic business marketplace. (Food vendors please see Food Vendor Application)

Wednesday, July 4, 2007

EVENT TIMES:

Day Activities 12:00 p.m. – 5:00 p.m.

SETUP TIMES:

Wednesday, July 4, 2007 7:30 a.m. – 10:30 a.m.

STRIKE TIMES:

5:00 p.m. – 7:00 p.m.

All vendors required to remain set up until 5:00 p.m.

Event producers will determine booth assignments.

BUSINESS VENDOR FEE

*All vendors must use booths provided. No other booths or set-ups are allowed.
Vendor signage can be displayed only within each booth. Signage must be a specified size
in accordance with our ability to hang.*

BUSINESS VENDOR:

<p>____ 10' x 10' Booth</p> <ul style="list-style-type: none"> • One (1) 6' table with linen • Two (2) chairs <p>CVCC Member Fee: \$400</p>	<p>10' x 10' Booth Fee: \$ _____</p> <p>Non-member Fee: \$450</p> <p>Non-profit Fee: \$250</p>
<p>____ 10' x 20' Booth</p> <ul style="list-style-type: none"> • Two (2) 6' tables with linen • Four (4) chairs <p>CVCC Member Fee: \$575</p>	<p>10' x 20' Booth Fee: \$ _____</p> <p>Non-member Fee: \$625</p>

BUSINESS SPIRIT SPONSOR: *Upgrade your involvement to sponsor level and receive marketing opportunities*

<p><u>Business Sponsor Fee: \$2000</u></p> <ul style="list-style-type: none"> • 10' x 20' Booth • Banner Promotion on Area Tower • Logo Recognition on Website • Logo Recognition in ALL print media • Logo Recognition in Event flyer • Four (4) VIP Tickets 	<p>Sponsor Fee: \$ _____</p>
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CELEBRATION SPIRIT SPONSOR: *Upgrade your involvement to sponsor level and receive marketing opportunities*

<p><u>Celebration Sponsor Fee: \$1000</u></p> <ul style="list-style-type: none"> • 10' x 10 Booth • Logo recognition on website • Logo recognition in Chula Vista print media • Logo Recognition in the Event Flyer 	<p>Sponsors Fee: \$ _____</p>
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Power: *available at additional charges – refer to the Electrical Worksheet*

★ **Chula Vista Chamber of Commerce, Telephone: (619) 420-6602, Fax: (619) 420-1269**

Vendor Coordinator: Cynthia Morris: (760) 518-0692, cynthiamorris1@bellsouth.net

APPLICANT INFORMATION

BUSINESS NAME

CONTACT NAME

ADDRESS (include city and zip code)

PHONE NUMBER

FEDERAL ID NUMBER

FAX NUMBER

EMAIL ADDRESS

VENDOR RESPONSIBILITY

Along with the application the following photocopies must be provided:

● *Business license*

● *Insurance*

POWER

If you require power you **must** complete the Electrical Worksheet and include it with this application.
Describe all equipment and appliances that will need power.

INSURANCE

**Vendors are required to carry insurance coverage.
Along with your application, please include a copy of your policy
naming the City of Chula Vista, Chula Vista Chamber of Commerce, The Port of San Diego and
Mowalla Productions, Inc. as additionally insured.**

PAYMENT

Please make check or money order payable to Chula Vista Chamber of Commerce, and return with your
Completed application and copies of insurance, permits, list of items, and electrical worksheet to:

Chula Vista Chamber of Commerce
Celebrate Chula Vista, Attn: Merissa Venegas
233 Fourth Avenue, Chula Vista, CA 91910
Merissa@chulavistachamber.org

APPLICATION DEADLINE: June 15, 2007

(No personal checks after June 15, only money orders will be accepted)

 **Chula Vista Chamber of Commerce**  **Telephone: (619) 420-6603, Fax: (619) 420-1269**

Vendor Coordinator: Cynthia Morris: (760) 518-0692, cynthiamorris1@bellsouth.net

PROMOTIONS AND GIVEAWAYS

If planning to use Food or Beverages in Promotional giveaways, all items to be used must be listed below.
All items must be approved by the Chula Vista Chamber of Commerce.

1. _____ 2. _____ 3. _____

No balloons are to be given away.

VENDING TERMS AND CONDITIONS

1. Vendors shall submit the required booth fee with application.
2. All business or other activity, for which the vendors have rented space, must be conducted within the designated 10x10 booth space only! No distribution, canvassing, flyers, nor vending of any kind may be done by strolling through the festival grounds.
3. The sale of alcoholic beverages of any kind is strictly prohibited.
4. Consumption of alcoholic beverages by vendors at their booth is prohibited.
5. **Electrical requirements:** available upon request. (Please see worksheet). All electrical appliances must conform to the uniform fire code of San Diego County.
6. **Permits:** You are required to obtain and display all necessary permits and/or licenses in order to operate on the festival grounds. If you are forced to close by any government agency for failure to obtain your necessary permits and/or licenses, Celebrate Chula Vista is not liable and will not refund fees. City of Chula Vista Business License office: (619) 691-5272 and State Board of Equalization: (619) 525-4527.
7. **Insurance:** You must provide proof of general liability insurance for a minimum of \$1,000,000 naming the City of Chula Vista, the Chula Vista Chamber of Commerce, The Port of San Diego, and Mowalla Productions, Inc. as additionally insured.
8. **Refunds:** Your booth fee is non-refundable unless cancellation, in writing, is received before May 31, 2007.
9. Trash containers will be provided by City of Chula Vista.

A submission of this application and payment of fees/deposit does not guarantee a space.

ACKNOWLEDGEMENT OF TERMS

I hereby warrant and confirm that the above information is, to the best of my knowledge, true and correct, and further certify that I have read all of the information provided in this application. It is agreed and understood that the completion of this application shall not be binding either to the proposed vendor or to City of Chula Vista, until accepted in writing by the Chula Vista Chamber of Commerce.

Signature and Date _____ Business _____

ELECTRICAL WORKSHEET

Please list all electrical items to be used and their wattage.
(Wattage can be found on a sticker on the back of each appliance)

appliance _____ amps _____	appliance _____ amps _____
appliance _____ amps _____	appliance _____ amps _____
appliance _____ amps _____	appliance _____ amps _____
appliance _____ amps _____	appliance _____ amps _____

Standard Power @ \$100.00
110 volt, 20 amps (a standard household outlet) Total: _____

Additional power, please call and request at (760) 518-0692

Please note: Special electrical service which is not pre-ordered will be installed at overtime weekend electrician's rate which is approximately double the rate quoted above, and may not be available.

I have read this entire application and shall comply with all terms and conditions.

Name _____ Signature _____

Business Name _____ Date _____

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